VIRGINIA:

BEFORE THE BOARD OF MEDICINE

IN RE:

MICHAEL D. POLLOCK, D.C.

License No.: 0104-000305

CONSENT ORDER

On May 13, 2010, a Special Conference Committee ("Committee") of the Virginia Board of

Medicine ("Board") convened to inquire into allegations that Michael D. Pollock, D.C., may have

violated certain laws and regulations governing the practice of chiropractic in the Commonwealth of

Virginia. After thorough review of the matters before it, the Committee determined that it could not

resolve the matter within the limits of its authority as set forth in Section 54.1-2400(10) of the Code of

Virginia (1950), as amended ("Code"), and therefore, pursuant to Section 2.2-4020 of the Code,

referred the matter to a formal administrative hearing.

In lieu of proceeding to a formal administrative hearing, the Board and Dr. Pollock, as

evidenced by their signatures affixed below, agree to enter into this Consent Order affecting the

license of Dr. Pollock to practice chiropractic in Virginia.

FINDINGS OF FACT AND CONCLUSIONS OF LAW

The Board adopts the following findings and conclusions in this matter:

1. Michael D. Pollock, D.C., was issued license number 0104-000305 by the Board to

practice chiropractic in Virginia on January 16, 1981. Said license is currently active and will expire

on October 31, 2010, unless renewed or acted upon.

2. Dr. Pollock violated Sections 54.1-2915.A(12), (13), (18) and (19) of the Code, and

18VAC85-20-100 of the Board of Medicine General Regulations, in that on or about January 9, 2009,

he performed a breast examination on Patient A, an act outside the scope of the practice of

chiropractic and behavior that may reasonably be interpreted as intended for his sexual arousal or gratification.

3. While admitting that his behavior in performing a breast examination on Patient A may be interpreted as intended for his sexual arousal or gratification, Dr. Pollock denies this and contends that he did not perform the breast examination for any purpose other than what he felt was for an appropriate clinical purpose, which the Board has determined was not within his scope of practice.

## **CONSENT**

- I, Michael D. Pollock, D.C., by affixing my signature hereto, acknowledge that:
- 1. I have been advised specifically to seek the advice of counsel prior to signing this document and am represented by Michael L. Goodman, Esquire;
- 2. I am fully aware that without my consent, no legal action can be taken against me, except pursuant to the Virginia Administrative Process Act, § 2.2-4000.A et seq. of the Code;
  - 3. I have the following rights, among others:
    - a. the right to a formal hearing before the Board;
    - the right to appear in person or by counsel, or other qualified representative
       before the agency; and
    - c. the right to cross-examine witnesses against me.
  - 4. I waive all rights to a formal hearing;
  - 5. I admit the truth of the above Findings of Fact; and

6. I consent to the following Order affecting my license to practice chiropractic in the Commonwealth of Virginia.

## ORDER

WHEREFORE, based on the foregoing Findings of Fact and Conclusions of Law, and with the consent of the licensee, it is hereby ORDERED that effective September 30, 2010, the license of Michael D. Pollock, D.C., be INDEFINITELY SUSPENDED for a period of not less than twelve (12) months.

Should Dr. Pollock seek reinstatement of his license, he shall submit with his petition comprehensive psychiatric and psychological evaluations conducted within ninety (90) days prior to submission of his petition for reinstatement. Dr. Pollock shall be noticed to appear before the Board, in accordance with the Administrative Process Act. As petitioner, Dr. Pollock has the burden of proving his competency and fitness to practice chiropractic in the Commonwealth of Virginia in a safe manner.

Pursuant to Section 54.1-2920 of the Code, upon entry of this Consent Order, Dr. Pollock shall forthwith give notice, by certified mail, of the suspension of his license to practice chiropractic to all patients to whom he is currently providing services. A copy of this notice shall be provided to the Board when sent to patients. Dr. Pollock shall cooperate with other practitioners to ensure continuation of treatment in conformity with the wishes of the patient. Dr. Pollock shall also notify any health insurance companies, health insurance administrators or health maintenance organization currently reimbursing him for any of the healing arts.

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Effective September 30, 2010, the license of Michael D. Pollock, D.C., will be recorded as suspended and no longer current.

Pursuant to Section 54.1-2400.2 of the Code, the signed original of this Consent Order shall remain in the custody of the Department of Health Professions as a public record and shall be made available for public inspection and copying upon request.

FOR THE BOARD:

William L. Harp, M.D. Executive Director

Virginia Board of Medicine

9/ 8/2010

ENTERED

SEEN AND AGREED TO:

Michael D. Pollock, D.C.

COMMONWEALTH OF VIRGINIA
COUNTY/CITY OF KICHMONOL TO WIT:

Subscribed and sworn to before me, the undersigned Notary Public, in and for the Commonwealth of Virginia, at large, this <u>IST</u> day of <u>September</u>, 2010, by Michael D. Pollock, D.C.

CANDIS AUTUMN GOLD Notary Public Commonwealth of Virginia 7194033 My Commission Expires Aug 31, 2012 Notary Public

Registration Number: 7194033